Meeting the Need for Interoperability and Information Security in Healthcare IT

Mr. Chairman, I look forward to learning more about Health Information Technology, Interoperability and Information Security, as well about your bill HR 2406 this morning from our esteemed panel of witnesses.

As a longtime supporter of initiatives such as telehealth for rural communities, I understand the value of Health Information Technology. Many sectors of our economy rely on information technology to increase efficiency and minimize errors. The healthcare sector should not be different. We invest over $1.7 trillion annually in healthcare, and yet the system is plagued with inefficiency. A recent RAND Corporation study stated that if most hospitals and doctors' offices adopted Health Information Technology, the efficiency savings alone would average over $77 billion a year. Moreover, the study found that if hospitals implemented a Health Information Technology system, around 200,000 adverse drug events could be eliminated annually.

Despite these obvious benefits, developing a nationwide HIT network is expensive and challenging. One of the biggest challenges involves sharing information from system to system, also known as interoperability. We must develop interoperable standards so that the systems being developed today and tomorrow will function together smoothly. In order to address this need, President Bush established the Office of the National Coordinator at the Department of Health and Human Services and that office has put together a consortium of public and private entities, including NIST, to develop interoperability and conformance standards. This consortium, the American Health Information Community (AHIC) has been working over the last few years on this important task.

I applaud your efforts at bringing a Health Information Technology bill before this committee, and I would like to know more about how H.R. 2406 will affect the process currently underway at the Department of Health and Human Services. For instance, it appears that the bill would give NIST overall authority for writing standards, procedures and guidelines for the healthcare industry If that is the case, I wonder whether NIST is the best vehicle for full scale adoption of HIT standards. While I certainly agree that NIST has a role to play, NIST has never before been a body that has set policy. Instead, they have taken an agreed upon policy and set about standardizing it. Since there is already a vehicle in place that is setting policy at HHS, will this bill derail that process? Or will this legislation establish a parallel process between two agencies?

Additionally, I am unclear on where the money will come from for NIST to undertake HIT initiatives. Will it have to come at the expense of other NIST projects and priorities? The Administration asked Congress for $118 million for FY '08 for HIT, and it looks like

Congress will appropriate somewhere around $60 to $70 million dollars. Will NIST projects be cut in order to compete with what the Administration has already undertaken?

I think that it is clear that we are all seeking to improve Health Information Technology Systems as quickly and as smoothly as possible.   I look forward to hearing from all the witnesses on this important topic. Thank you Mr. Chairman, and I yield back the balance of my time.